

MAY 23 2005

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PTO/SB/21 (09-04)

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/616,453
Filing Date	July 8, 2003
First Named Inventor	Kley, Victor B.
Art Unit	2883
Examiner Name	C.M. Kalivoda
Total Number of Pages in This Submission	020921-001612US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> Return Postcard
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
<input type="checkbox"/> Express Abandonment Request	The enclosed is a response to the non-compliant office communication dated April 22, 2005, for the above-entitled application.	
<input type="checkbox"/> Information Disclosure Statement		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name Townsend and Townsend and Crew LLP

Signature David Slone

Printed name David N. Slone

Date May 19, 2005 Reg. No. 28,572

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature Valerie Peterson

Typed or printed name Valerie Peterson

Date May 19, 2005



PATENT
Attorney Docket No. 020921-001612US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

VICTOR B. KLEY

Application No.: 10/616,453

Filed: July 8, 2003

For: SCANNING PROBE
MICROSCOPY INSPECTION AND
MODIFICATION SYSTEM

Customer No.: 20350

Confirmation No. 1054

Examiner: C.M. Kalivoda

Technology Center/Art Unit: 2883

**RESPONSE TO NON-COMPLIANT
AMENDMENT**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Notice of Non-Compliant Office Action mailed April 22, 2005,
please enter the following amendments and remarks:

Correction of the Amendment to the claims section begins on page 2 of this paper.

Remarks/Arguments begin on page 3 of this paper.